MRI Service Utilization List, May 1, 2005 **MOBILE ROUTES #105 - #109**

Reporting Period January 1, 2004 through December 31, 2004

MRI Service ID Number and Service Name		Number of Clinical Units <u>1</u>	Number of Visits	Number of Adjusted Procedures <u>2</u>	Number of Available Adjusted Procedures
010285	Mobile #105	1	5,322	11,832	4,797
030010	Allegan General Hospital	1	12	29	12
170020	Chippewa County War Memorial	1	755	1,927	781
160020	Community Mem Hosp/Cheboygan	1	1,275	3,241	1,314
620010	Gerber Memorial Hospital	1	173	259	105
780010	Memorial Healthcare Ctr/Owosso	1	437	1,313	532
530010	Memorial Med Ctr of West Mich	1	16	55	22
830034	St. John Detroit Riverview Hosp	1	313	566	230
830420	St. John Hospital & Med Ctr	1	951	2,364	958
820190	St. Mary Hospital/Livonia	1	181	346	140
63C682	Universal Imaging/Auburn Hills	1	339	477	193
82C677	Universal Imaging/Dearborn Heights	1	363	506	205
380010	W.A. Foote Memorial Hospital	1	507	749	304
010299	Mobile #106	1	4,783	6,969	0
63C690	Clarkston Ambulatory Corp.	1	261	340	0
500060	Mich Resonance Imaging/MCGH	1	2,483	3,608	0
50C603	Mt. Clemens Medical Office	1	291	376	0
50C630	Neurosurgery Group, P.C.	1	55	88	0
820010	Oakwood Annapolis Hospital	1	1,334	2,010	0
820170	Oakwood Southshore Medical	1	359	548	0
010385	Mobile #109	1	3,975	7,514	512
620010	Gerber Memorial Hospital	1	158	239	16
290010	Gratiot Community Hospital	1	156	412	28
392611	Kalamazoo Radiology	1	568	785	53
780010	Memorial Healthcare Ctr/Owosso	1	1,081	3,019	206
530010	Memorial Med Ctr of West Mich	1	194	524	36
41C011	Orthopedic Assoc of Grand Rapids	1	1,248	1,323	90
820190	St. Mary Hospital/Livonia	1	66	130	9
590060	United Memorial Hosp, Greenville	1	504	1,082	74

^{1 -} Includes existing and approved units.2 - Adjustments are defined in Section 13 of the Certificate of Need Review Standards for Magnetic Resonance Imaging.

Note: These data represent all accepted data available to the Department for the January 1, 2004 through December 31, 2004 reporting period. These data DO NOT INCLUDE:

- a. Data that was not submitted on a timely basis.
- b. Data that has not completed system edits.
- c. The subtraction of "doctor commitments" for Certificate of Need applications for Magnetic Resonance Imaging services that are currently in review or filed on or after the above report preparation date.

Source: Michigan Magnetic Resonance Imaging Data System

CON Health Facilities Evaluation Section, Michigan Department of Community Health